## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# M50343

Entity Name: J.H. ANDERSON HOLDINGS, INC.

FILED Apr 16, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1808 SE 7 STREET

FT.LAUDERDALE, FL 33316 US

1822 EDGEWOOD AVE SOUTH
JACKSONVILLE, FL 32205 US

Current Mailing Address: New Mailing Address:

PO BOX 460430

FT.LAUDERDALE, FL 333460430 US

FEI Number: 65-0039384 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ELLEFSEN, KRISTINE A
1808 SE 7 STREET
ELLEFSEN, KRISTINE A
3345 OAK DRIVE

FT.LAUDERDALE, FL 333460430 US HOLLYWOOD, FL 33021 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

04/16/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD ( ) Delete Title: PD (X) Change ( ) Addition

 Name:
 ANDERSON, JOHN H
 Name:
 ANDERSON, JOHN H

 Address:
 1808 SE 7TH STREET
 Address:
 1822 EDGEWOOD AVE SOUTH

 City-St-Zip:
 FT. LAUDERDALE, FL 33316
 City-St-Zip:
 JACKSONVILLE, FL 32205

Title: SD () Delete Title: SD (X) Change () Addition Name: ANDERSON, KATHRYN K Name: ANDERSON, KATHRYN K

 Name:
 ANDERSON, KATHRYN K
 Name:
 ANDERSON, KATHRYN K

 Address:
 1808 SE 7TH STREET
 Address:
 1822 EDGEWOOD AVE SOUTH

 City-St-Zip:
 FORT LAUDERDALE, FL 33316
 City-St-Zip:
 JACKSONVILLE, FL 32205

Title: DVP ( ) Delete Title: DVP (X) Change ( ) Addition

 Name:
 ELLEFSEN, KRISTINE
 Name:
 ELLEFSEN, KRISTINE

 Address:
 1808 SE 7TH STREET
 Address:
 3345 OAK DRIVE

 City-St-Zip:
 FORT LAUDERDALE, FL 33316
 City-St-Zip:
 HOLLYWOOD, FL 33021

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KRISTINE A. ELLEFSEN RA 04/16/2005